

**UNITED STATES HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE STATEMENT**

FORM B

For use by candidates
and new employees

NOV 15 2007

Period Covered: January 1, 2007 - November 14 2007

Merlin Lee Harder

P.O. Box 55 Hillsboro, Iowa

(Mailing Address)

2007 DEC 18 AM 8:46

319 931-3761

Daytime Telephone:

LEGISLATIVE RESOURCE CENTER

2007 NOV 26 PM 3:09

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only)

Filer
Status



Candidate for the
House of Representatives

State: Iowa
District: 2nd

Date of
Election: 11.4.08

Check if
Amendment



New officer or
employee

Employing Office: _____

**A \$200 penalty shall be assessed
against anybody who files more
than 30 days late.**

In all sections, please type or print clearly in black ink.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?
If yes, complete and attach Schedule I.

Yes ☒

No ☐

IV. Did you hold any reportable positions on or before the date of filing in the current calendar year or in the prior two years?
If yes, complete and attach Schedule IV.

Yes ☐

No ☒

II. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period?
If yes, complete and attach Schedule II.

Yes ☒

No ☐

V. Did you have any reportable agreement or arrangement with an outside entity?
If yes, complete and attach Schedule V.

Yes ☐

No ☒

III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?
If yes, complete and attach Schedule III.

Yes ☐

No ☒

VI. Did you receive compensation of more than \$5,000 from a single source in the two prior years?
If yes, complete and attach Schedule VI.

Yes ☒

No ☐

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 8.)

Yes ☐

No ☒

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?

Yes ☐

No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification

Signature of Reporting Individual

Date (Month, Day, Year)

I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.

Merlin Lee Harder

10-28-07

SCHEDULE I—EARNED INCOME (INCLUDING HONORARIA)

Name Merlin Lee Hardon Page 2 of 4

List the source, type, and amount of earned income, including honoraria, from any source (other than your current employment by the U.S. Government) totaling \$200 or more during the current year to the filing date *and*, separately, the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

[illegible]

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For additional assets and unearned income, use next page.

SCHEDULE V—AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	<i>None</i>	

SCHEDULE VI—COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of such compensation received by you or your business affiliation for services provided directly by you during the *two* prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any nonprofit organization if you directly provided the services generating a fee or payment of more than \$5,000. **Exclude:** Payments by the U.S. Government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule I.

	Source (Name and Address)	Brief Description of Duties
<i>Example:</i>	Doe Jones & Smith, Hometown, Homestate	Accounting services
	<i>None</i>	